

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002595

FILED
May 01, 2008
Secretary of State

Entity Name: MANAS'SEH CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

1464 RAVEN DR. S.
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 77578
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 59-3639902 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ANDERSON, SANDRA G
1464 RAVEN DR. S.
JACKSONVILLE, FL 32218 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ANDERSON, SANDRA G
Address: 1464 RAVE DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32218

Title: DST () Delete
Name: BROWN, LAVERN D
Address: 4836 MISSISSIPPI CT
City-St-Zip: JACKSONVILLE, FL 32209

Title: DVP () Delete
Name: ANDERSON, PATRICK T
Address: 1464 RAVEN DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: ANDERSON, SANDRA G
Address: 1464 RAVE DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32218

Title: DP (X) Change () Addition
Name: BROWN, LAVERN D
Address: 4836 MISSISSIPPI CT
City-St-Zip: JACKSONVILLE, FL 32209

Title: DST (X) Change () Addition
Name: MACKEY, MARY T
Address: 3614 N, DAVIS ST
City-St-Zip: JACKSONVILLE, FL 32209

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA G. ANDERSON

DVP

05/01/2008

Electronic Signature of Signing Officer or Director

Date